## **CLAIM FORM**

Mail To:

PG&E Law - Claims Dept. 1850 Gateway Blvd. 6th Floor Concord, CA 94520-OR-

Email to: LawClaims@pge.com -OR-

Fax to: 925-459-7326

Pacific Gas and Electric Company...

62-1444 Rev 2/2011

Authority Dakley  Description of Incident  PROPERTY DAMAGE: Attach repair estimates, invoices, proof of purchase, or supporting documents. (Do Not Send Original 2005 POOLAGE: Include a separate itemized list of each item of food spoiled and documentation of cost.  NOTE: Under California damages law you are entitled to reimbursement for the lesser of fair market value or the cost to repair	Apt. Number  Apt. Number  (A)  (A)  (A)  (A)  (A)  (A)  (A)  (A	ROCK MUSUR 12018
State CA Zip Code Email Address Street  13.75 Qual Valley State CA Zip Code Email Address AMIPM Location of Incident (check if same as mailing address D)  Pescription of Incident  Was driving on highway of and  Location of Incident (check if same as mailing address D)  PROPERTY DAMAGE: Attach repair estimates, invoices, proof of purchase, or supporting documents. (Do Not Send Originat FOOD SPOILAGE: Include a separate itemized list of each item of food spoiled and documentation of cost.  NOTE: Under California damages law you are entitled to reimbursement for the lesser of fair market value or the cost to repair replacement cost of the item and depreciate that amount to arrive at the fair market value. You may consider consulting with item Description  Make/Brand  Model: Name /Number/Size	Apt. Number  Apt. Number  Apt. Number  Apt. Number	15) 685-937  ROCK  MABUR  12018  I property. We use the carrier.
State	Apt. Number  Apt. Number  Apt. Number  Apt. Number	ROCK MADUR 12018  I property. We use the carrier.
ailing Address - Street  IN DAMEY  ate of Incident  Time  AMIPM    State	Apt. Number  Apt.	ROCK MADER 12018  I property. We use the carrier.
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Total Amount Claimed		
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Total Amount Claimed		
		\$1284,2
/ere you injured? Yes MNo If yes, please describe:		· AD HOU
/ere you injured? Yes Mo If yes, please describe: ther Losses (lost wages, lost revenue, medical expenses, etc.) Use Additional paper if necessary		, 
uici Losses (lost rages), lost revenue, medicai expenses, etc.) ose Additional paper il necessary		
/itnesses: Name, Address, and Telephone	Employee	Other
understand that Pacific Gas and Electric Company will review all documentation in support of this claim. I certify that the	e foregoing is	true and correct.
repared By Relationship to Claimant	Self	
1 1	The second	
ignature Junha Sefferson Date 1-30		CI
ignature Japanes Seffensive Date 1-30	-2010	

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"Champions of Dealer Excellence" Acura of Concord, winner of Acura's highest award for client satisfaction "Precision Team-Dealership of Distinction" for 12 years!

CUST. NO.	TAX EXEMPT NUMBER	CUST. P. O. NO.	SHIP VIA	PAY	SOLD BY	INVOICE DATE	INVOICE
129502		2006 RL		PENDING	MICHAEL	01/30/19	PQ57827 ACR
	415-685-9377						non
B         	TYISHA JEFFERSON , CA	ı		LAB	KB16506C000789 OR \$ 175.00 C ORDER		

QUA SHIP	NTITY В. О.	PART NU	MBER / DESCRIPTION	BIN	LIST	NET	AMOUNT
1	0	73150-SJA-003	MLDG, FR. WINDS	ZSPO	50.70	50.70	50.70
4 4 1		LABOR \$175.00 91573-SJA-305 91574-SJA-305 73111-SJA-A01	CLIP A; FR. CLIP B; FR. GLASS SET, FR.	D43B D43B ZSPO	12.14 14.00 979.65		48.56 56.00 979.65
200	a .						
-							
5 5		-		1			
		ALL GOODS RETURNED.	OS ACCEPTED AFTER 10 DAYS	HANDLING CHARGE		SUBTOTAL	1134.91
	NO RETURNED GOODS ACCEPTED AFTER 10 DAYS.  TERMS: NET 10 PROXNO DISCOUNT  ALL PRICES SUBJECT TO CHANGE WITHOUT NOTICE		RESTOCK CH	0.00			
		NABLE WITHOUT PRIOR ELECTRICAL ITEMS OR S			TAX		99.30
INVO			EDGES RECEIPT OF S RECEIVED FREE OI				
HCVD. B					FREIGHT F	YAY THIS AMOUNT	0.00 1234.21

13:55:00 CUSTOMER COPY

\*\* PRICE QUOTE \*\*

**NET524** 

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Search N	ames						
Search Crite	eria.						
Last Name		First Name			Name ID		
Company		Address			Name Ty	pe	<b>[2</b> ]
Phone#	4156859377	State		1-1	Zip Code		
Email		City					
VIN	And the second s	Stock#					
Results For	ınd - 1		Search (F5)	Mote	,   Se	ect (F17)	<u>C</u> lear
			Address	AND DESCRIPTION OF THE PERSON	City	St Phon	
Name ID No. 129502 T	ame Yisha Jefferson	Other Name	. Address		uty		415) 685-937
129502 T	yisha Jefferson	S 1650	•	00		C (H) (	415) 685-937
129502 TO	YISHA JEFFERSON	5 1650 1050	\$CC	115) 685-	9377	C (H) (	415) 685-937

Tyishachilton 11119@)

[ Juni ]

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